

Headquarters U.S. Air Force

Integrity - Service - Excellence

AFMS Council Brief FY06-11 POM



“I think, You think, We agree!”

1 April 2004

**Michael W. Miller, Col, USAF,
MSC**

**Deputy Assistant Surgeon
General**

Medical Plans and Programs

michaelw.miller@pentagon.af.mil

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DO NOT RELEASE OUTSIDE OF THE AFMS

Purpose

■ Purpose:

- Finalizing AFMS programs for FY06-11

POM

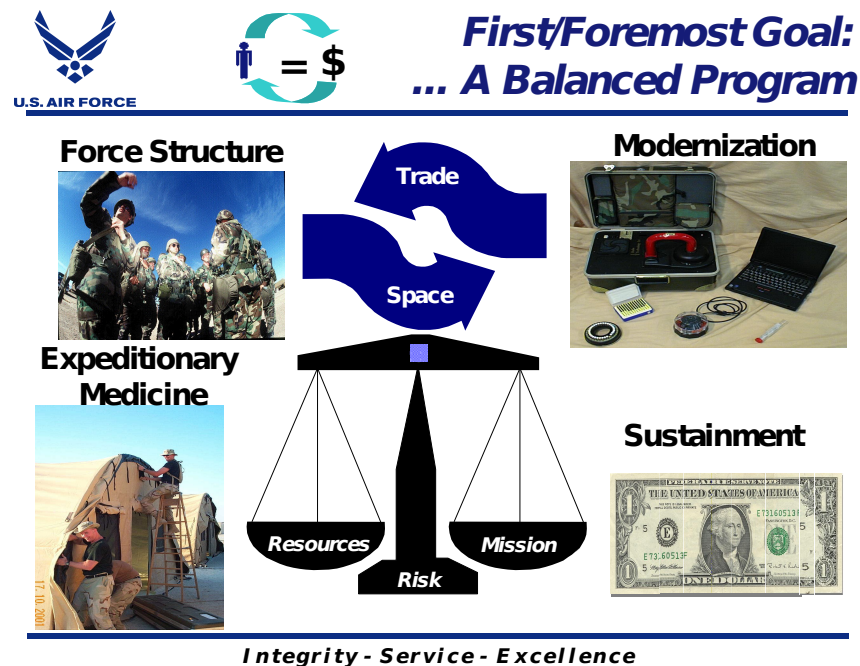
■ Type: Decision

- Recommendation on

- Internal Bills

- POM Option

■ Length of Briefing: 2 hours





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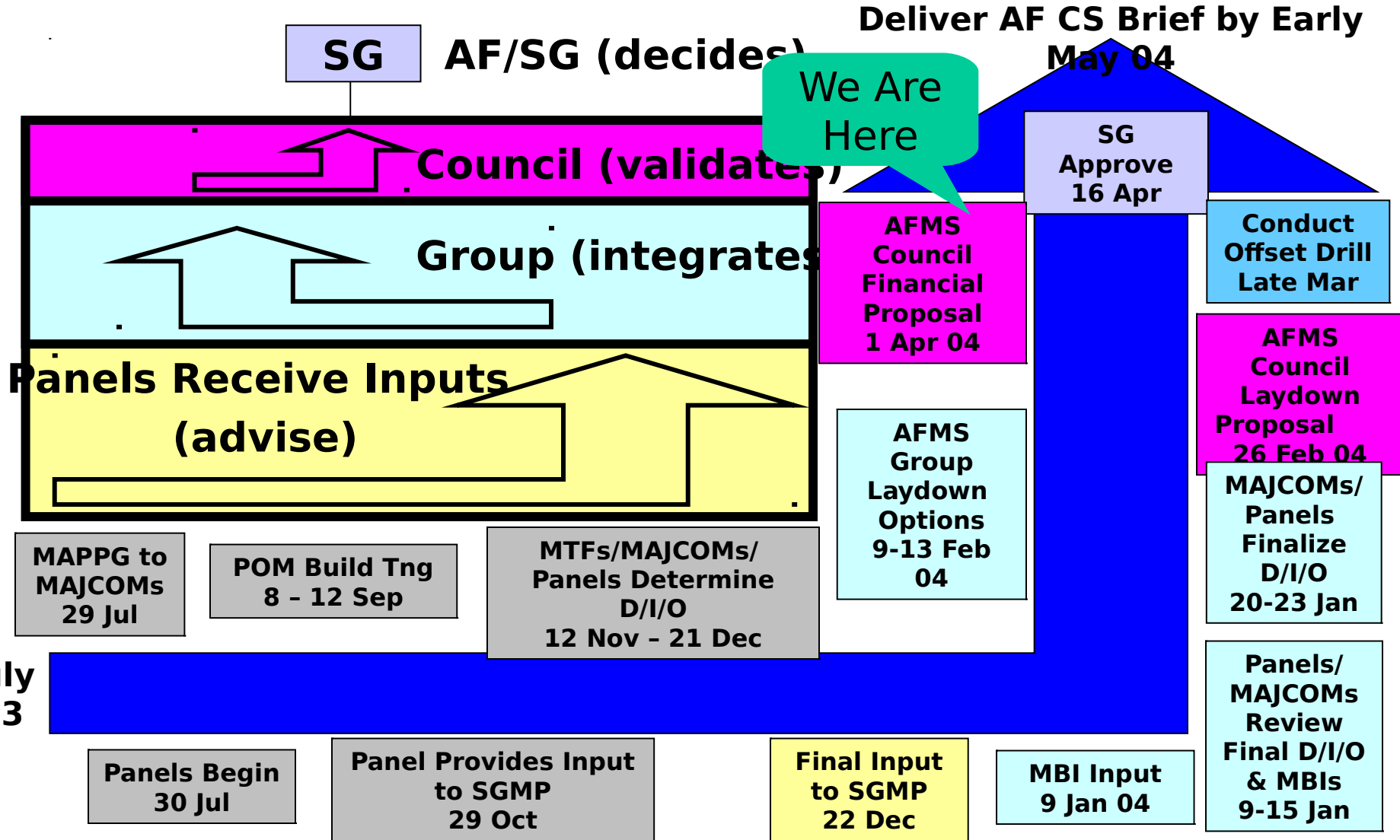
Overview

- **Timeline**
- **Process**
- **Resource Assumptions**
- **SG Vector Check: Questions and Answers**
- **Private Sector Care Model**
- **Resolution of External and Internal Bills**
- **FY06-11 POM Option A-2 Update**
- **FY06-11 POM Option B-2 Update**
- **Recommendation**



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AFMS 06-11 POM Build: Timeline





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Resource Assumptions

- **Fiscal Guidance Based on FY05 President's Budget**
- **Inflation based on specific rates as dictated by OSD**
- **Baselines adjusted for fact-of-life program changes**
- **Manpower TOA unchanged across FYDP**
- **External bills generated from actions external to AFMS...T-Nex**
- **Accrual Fund Productivity will remain constant to FY03**
- **Long View approach guided POM Build**
- **MTF Efficiencies from PBD 041 decremented against Rev Fin**
- **Increase in Third Party Collections will help mitigate bills**



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Process

- MAPPG sent to MAJCOMs - July 2003
 - Overarching guidance sent to field
- Initial POM Build Conference - Sep 2003
 - Guidance and approach presented/taught
- Leesburg I, MAJCOM/Panel Crossfeed - Jan 2004
 - Over 1100 D/I/O's considered
 - MAJCOM/Panels proposed a laydown strategy
 - Some questions remained (OB, Modernization TOA, etc)
- Vector Check - Feb 2004
 - Environmental pressures creating uncertainty
 - POM Options need to be developed
- Leesburg II - Feb 2004
 - AFMS Group meeting to finalize Leesburg 1 Options
 - Develop Alternative laydown strategies
- AFMS Council Brief - Feb 2004
 - Brief on three MAJCOM laydown options
- **SG Vector Check: Questions and Answers**
- **Private Sector Care Model**
- **Resolution of External and Internal Bills**

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SG Vector Check: Questions and Answers



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**Enrollment, SCO
ROI,
SGP Increases**



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Forecasting POM Enrollment

■ SG Question: Why a 3% enrollment projection?

Represents AF catchment area enrollment population

Month	AD Army	AD Air Force	AD Navy	ADFM	Ret Army	Ret AF	Ret Navy	Ret FM	Grand Total	Percent Change
Oct-99	12,603	312,451	11,659	495,123	14,084	63,493	12,216	171,406	1,093,035	
Sep-00	13,148	308,534	13,741	506,246	16,247	71,477	14,163	193,254	1,136,810	4.00%
Sep-01	13,936	308,569	13,451	491,640	17,425	77,626	15,424	203,817	1,141,888	0.45%
Sep-02	18,934	328,760	16,321	508,765	22,303	95,005	19,464	230,045	1,239,597	8.56%
Sep-03	31,043	346,000	17,844	515,737	23,968	103,681	21,073	246,839	1,306,185	5.37%
Annualized	36.58%	2.68%	13.26%	1.04%	17.54%	15.82%	18.13%	11.00%	4.88%	4.88%
Mar-04	22,243	346,414	17,416	503,062	24,702	107,613	21,889	245,640	1,288,979	-1.32%

(Source: TRICARE Operations Center Enrollment)

- Enrollment growth averaged 4.88% per year
- FY99-FY03
- FY04 experienced enrollment decline through Mar 04
- Decline largely attributable to non-AF AD & ADFMs

Forecasting POM Enrollment

FY	FY03	FY04	FY05	FY06	FY07	FY08	FY09	FY11	FY10	FY11
% Change	3	3	3	3	0	0	0	0	0	0

- **Flat lined after FY06**
 - **Historic trend indicates continued growth; however, conservative approach preferred for programming**
- **Results in 22 AD PCMs added in FP**
- **PCO enhancement important link to SCO success**

Laydown based on conservative enrollment projection



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SCO ROI Pilots Lessons Learned

- **SG Question: What is AFA/Nellis SCO ROI?**
 - Strong PCO enhances referral base for SCO success
 - Case mix limited without network & non-Prime referrals
 - Market selection is pivotal
 - Strong Group Practice Manager needed to launch program
 - Recapture “lag factors” make first year difficult
 - New mindset, learning curves for MTF staff & beneficiaries
 - Contract, equipment, supply delays hinder execution
 - AFMSA/SGOZ testimony of ECA & CCA improvement
 - Med Ops contends positive ROI once rolling; jury still out
- Med Ops Panel used lessons learned to improve FY06-11 lay**



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SCO Conclusions

- **SCO pilots provided a wealth of lessons learned**
 - **Lessons learned applied in FY06-11 POM**
- **Return on investment (ROI) unresolved due to 1st year lag factor & difficulties identified in lessons learned**
 - **Med Ops Panel cautiously optimistic of positive ROI**
- **Bottomline: Must enhance PCO & fix “chokepoints” of inpatient & peri-operative capabilities**



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SGP Laydown

- **SG Question: Why the large increase in Aerospace? Need for them to brief me their plan.**
- **Brief to SG given by SGOP & AO Panel Chair**
 - **Reiterated mission increase for Public Health & BEE**
 - **Explained PH & BEE PLATT increases**
 - **Explained reengineered Health Promotions**



SG Vector Check Results

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- **SG Approved**
 - **Enrollment projection (this decision pending)**
 - **Accepted forecast of positive SCO ROI (this decision pending)**
- **SGP Laydown**
- **Restoration of Spangdahlem & Landstuhl support**
- **Focus final POM deliberations on Options A-2 & B-2**

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Private Sector Care Model



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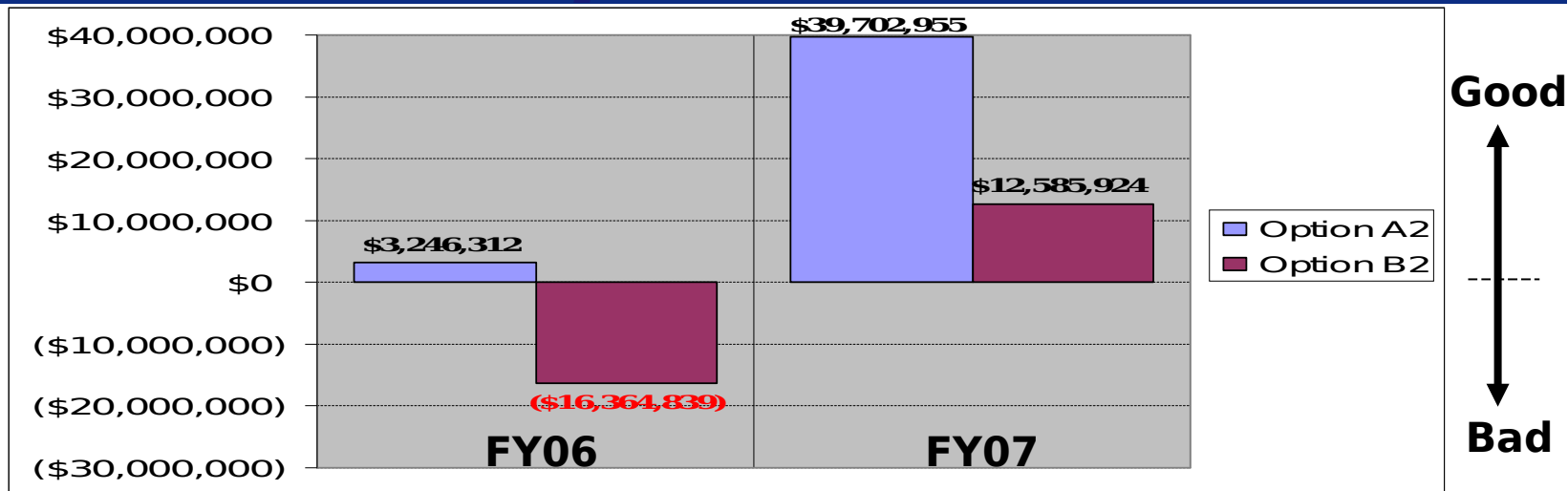
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Private Sector Care Model

- **Model estimates impact of laydown on PSC**
 - **PCO/SCO enhanced at specific MTFs (varies by Option)**
 - **Staffing PCO/SCO drives some service transitions**
 - **Must evaluate net impact on AFMS of resource decisions**
- **Process for vetting PSC Model**
 - **Jointly developed model**
 - **Coordinated with MAJCOMs via AFMS Group/Panels**
 - **Net impact on PSC will result in shift of TOA**

PSC Model forecasts significant benefit for POM A-2 over

PSC Recapture Impact POM Options A-2 and B-2



- No net change in AFMS TOA
- PCO/SCO enhanced at 21 sites
 - Resources transitioned IAW Long View Strategy
 - PSC increased at donor MTFs; decreased at gaining
- PSC reductions used to pay down MTF efficiencies
- Overall net impact of PSC greater for Option A-2

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Resolution of External and Internal Bills



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Tab P Submission

Unfunded Requirements

	(figures are in 000's)						
AFMS Unfunded	FY06	FY07	FY08	FY09	FY10	FY11	FY06-11
Appointing	\$ 13,294	\$ 14,078	\$ 14,909	\$ 15,744	\$ 16,689	\$ 17,690	\$ 92,404
Utilization Mgmt	\$ 26,559	\$ 28,339	\$ 30,037	\$ 31,179	\$ 33,050	\$ 35,033	\$ 184,196
DoD/MERB	\$ 2,200	\$ 2,266	\$ 2,334	\$ 2,404	\$ 2,476	\$ 2,550	\$ 14,231
Referral Mgmt Centers for T-Nex	\$ 4,520	\$ 4,705	\$ -	\$ -	\$ -	\$ -	\$ 9,225
OB Contract Bill	\$ 16,300	\$ 23,700	\$ 24,293	\$ 24,900	\$ 25,222	\$ 26,160	\$ 140,574
MMSO (Total Risk)	\$ 37,071	\$ 39,433	\$ 41,927	\$ 45,669	\$ 49,399	\$ 53,405	\$ 266,904
AMP	\$ 11,934	\$ 12,602	\$ 13,308	\$ 14,053	\$ 14,840	\$ 15,671	\$ 82,409
Pharmacy	\$ 18,523	\$ 21,268	\$ 27,243	\$ 34,269	\$ 38,382	\$ 42,987	\$ 182,672
MILCON	\$ -	\$ 52,755	\$ 49,089	\$ 65,084	\$ 59,461	\$ 59,830	\$ 286,219
Procurement	\$ 19,917	\$ 20,546	\$ 21,942	\$ 32,876	\$ 31,994	\$ 31,098	\$ 158,374
Total	\$ 150,318	\$ 219,692	\$ 225,082	\$ 266,179	\$ 271,512	\$ 284,425	\$ 1,417,208

- TMA input on Tab P due & submitted - 23 March 2004
- If some of these funded (e.g. OB, MMSO), will reduce offsets required from MAJCOMS

External Bills

(Figures are in

\$000's)

	Issue	FY06	FY07	FY08	FY09	FY10	FY11
1	Appointing	12,800	13,312	13,844	14,398	14,974	15,573
2	Utilization Management	18,959	20,021	21,142	22,326	23,576	24,896
3	DODMERB	2,200	2,288	2,380	2,475	2,574	2,677
4	Buckley Pharmacy	6,200	6,448	6,706	6,974	7,253	7,543
*	C-9 Divestiture	22,280	23,171	24,098	25,062	26,064	27,107

* Line funded issue; being worked through LAF FY06-11 POM

■ Prioritized by AFMS Group

Internal Bills

(Figures are in
\$000's)

Rank	Issue	FY06	FY07	FY08	FY09	FY10	FY11
1	Dental Central Contract	2,540	2,720	2,920	3,037	3,158	3,285
2	HAWC Contractors	5,400	6,800	7,700	8,008	8,328	8,661
3	OB Contract Bill	16,300	23,700	24,650	25,630	26,650	27,710
4	HPSP (includes dental option)	11,246	15,731	20,044	24,751	30,989	37,866
5	MMSO (with DCO Implemented)	2,000	2,080	2,163	2,250	2,340	2,433
6	Modernization delta	42,400	39,218	35,906	32,459	28,869	25,133
7	Referral Mgmt Centers	4,520	4,701	4,889	5,084	5,288	5,499
8	HPLRP	12,435	19,010	23,890	25,619	23,121	16,656
9	Patient Movement Items	8,500	8,840	9,194	9,561	9,944	10,342
10	CDA - Scheduler	355	369	384	399	415	432

- Prioritized by AFMS Group
- Bills constructed in blocks where possible
 - Identify risk if total program not funded
- Some programs (e.g. OB, MMSO) not blocked because would drive increased bills



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HQ SG Account

**\$274M in 05
APOM**

APOM Adjustments

Program Transfers



\$205M for 05 Budget Year

**Adjustments: Tradespace
PBD, SRM & Bolling Clinic**

\$149M for 06 POM



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Internal Bills and Tax Computation

Rank	Corporate Bills	FY06 Block I	FY06 Block II	FY06 Block III
1	Dental Central Contract	2,540	2,540	2,540
2	HAWC Contractors	5,400	5,400	5,400
3	OB Contract Bill	16,300	16,300	16,300
4	HPSP (dental option included)	4,182	8,146	11,246
5	MMSO	2,000	2,000	2,000
6	Modernization delta	21,000	25,920	42,400
7	Referral Mgmt Centers	4,520	5,400	8,660
8	HPLRP	7,602	9,972	12,435
9	Pt Movement Items	1,530	4,560	8,500
10	CDS-Scheduler	355	355	
TOTAL BILLS		65,429	80,593	109,481

Offsets	FY06 Block I	FY06 Block II	FY06 Block III
Trade Space	(38,406)	(38,406)	(38,406)
Previous HQ Scrub	(3,416)	(3,416)	(3,416)
HQ TDY Tax	(334)	(334)	(334)
HQ Contract Tax	(4,470)	(4,470)	(4,470)

HQ Fair Share Total	(46,626)	(46,626)	(46,626)
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Remaining Bill	18,803	33,967	62,855
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MAJ COM	FY06 Block I	FY06 Block II	FY06 Block III
11th Wing	(57)	(103)	(191)
ACC	(3,047)	(5,504)	(10,185)
AETC	(5,283)	(9,543)	(17,660)
AFA	(438)	(791)	(1,463)
AFMC	(3,252)	(5,876)	(10,872)
AFSOC	(210)	(380)	(703)
AMC	(3,695)	(6,674)	(12,351)
PACAF	(983)	(1,776)	(3,287)
SPACE	(1,044)	(1,886)	(3,491)
USAFE	(793)	(1,433)	(2,652)

MAJ COM Fair Share Totals	(18,802)	(33,966)	(62,855)
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- Bills stratified into 3 blocks
- Tradespace & HQs Offsets reduces amount of MAJCOM Offsets
- Tax computed based upon MAJCOMs percent of total TOA

MAJ COM	Fair Share (O&M)
11th Wing	0.30%
ACC	16.20%
AETC	28.10%
AFA	2.33%
AFMC	17.30%
AFSOC	1.12%
AMC	19.65%
PACAF	5.23%
SPACE	5.55%
USAFE	4.22%



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Offset Drill

Recommendation

Rank	Corporate Bills	Amt	Cumulative
1	Dental Central Contract	2,540	2,540
2	HAWC Contractors	5,400	7,940
3	OB Contract Bill	16,300	24,240
4	HPSP (dental option included)	4,182	28,422
5	HPSP (Block II Increase)	3,964	32,386
6	Referral Mgmt Centers	4,520	36,906
7	MMSO	2,000	38,906
8	Modernization delta	21,000	59,906
9	Pt Movement Items	1,530	61,436
10	HPLRP	7,602	69,038
11	HPSP (Block III Increase)	3,100	72,138
12	Referral Mgmt Centers (Block II Increase)	880	73,018
13	Modernization (Block II Increase)	4,920	77,938
14	HPLRP (Block II Increase)	2,370	80,308
15	Referral Mgmt Centers (Block III Increase)	3,260	83,568

Rank	Offsets	Amt	Cumulative
15	Tradespace	-46,626	-46,626
14	Block I Offsets	-18,800	-65,426
13	TDY Block II	-255	-65,681
12	Contracts Block II	-5,751	-71,432
11	TDY Block III	-1,799	-73,231
10	IM/IT Block II	-1,824	-75,055
9	Supplies Block II	-1,402	-76,457
8	Equipment Block II	-2,233	-78,690
7	IM/IT Block III	-689	-79,379
6	Supplies Block III	-4,632	-84,011

Recommendations used to complete POM Options

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FY06-11 POM Option A-2



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Details of MTF Laydown Option A-2

Services	APO M MILPERs	Propo s al MILPERs	Delta MILPERs (MTFs)
PCO			
Family Practice	3,160	3,332	172 (0)
Internal Medicine	392	357	-35 (+4)
Pediatrics	903	887	-16 (+1)
ER	828	653	-175 (-5)

Risks

- MTFs commanders understand/communicate the LV strategy
 - Linkage between PCO and SCO not understood
- Availability of contractors or contract services
- Ability to leverage enrollee PSC dollars

Assumptions

- Increased enrollment of 3% generates increased requirements
- Enhanced ECA/CCA/BCA at 21 MTFs
 - Laydown will contribute MTF efficiencies (PBD 041)
- PCO critical component of SCO success
- ER to UCC change driven by currency case

Costs

- Contracts
 - Resource Sharing & Contractor Support Services
- PSC



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Details of MTF Laydown Option A-2 Continued

Services	APO M MILPERs Total	Propo s al MILPERs Total	Delta MILPERs Total	Assumptions
SCO				- SCO - Funds clinics, perioperative and wards at 21 MTFs includes - Ob/Gyn - Provides services at 18 MTFs using 55 AD Ob/Gyn Faces - Transitions OB to PSC at Altus, Dover, Luke, Sheppard, USAFA - Inpatient - Reduces four inpatient facilities to outpatient facilities
General Surgery	318	331	13 (-2)	
Orthopedics/Podiatry	310	377	67 (-1)	
Obstetrics	619	511	-108 (-5)	
Inpatient Nursing	2,497	2,232	-265 (-4)	
Anesthesia	311	210	-101 (-1)	- Incirlik, Luke (Virtual OR), Offutt (ASU), Sheppard (ASU) - Project/SRM = \$14M - Contracts - Resource Sharing & Contractor Support Services - PSC
Risks - Political fallout over reduction of inpatient facilities and OB Services - Inpatient: Incirlik, Luke, Offutt, Sheppard, - OB: Altus, Dover, Luke, Sheppard, USAFA - Net PSC savings not realized				



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Details of MTF Laydown Option A-2 Continued

Service S	APOM MILPERs	POM A MILPERs	Delta MILPERs
SGP	900	1,019	119
PHO	1,250	1,316	66
BEE	1,190	1,234	44
Health Promotions / HAWC	261	93	-168
Dental	3,269	3,290	21

Risks

- Line does not accept contracting HAWCs at reduced manpower level
- Line does not support change in HAWC capability

Assumptions

- FSO - Adjusts officer and support to reflect operational needs & SGP
- PH - Improves capability for operational support
- Physiology - HPTT deployment to all but AMC, LRAFB to caretaker
- BEE - Improves env and occ surveillance capability - ramp-up to 08
- HAWCs - Reduces footprint but may add capability; uses contractors in CONUS & AD in

Costs

- HAWCs create savings
- DCO - contract dollars to support hiring support staff



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MTF Laydown Option A-2

MILPERs Trade-space

■ **MilPers Trade-space:**

- **+64 Enlisted**
- **- 4 Officers**

■ **Spend strategy**

- **Used 64 Enlisted FYDP to reduce enlisted contracts**
 - **Saved ~\$2.9M in Contract Costs**
- **Used Contract \$ to purchase 8 contract officers**
 - **Spent ~\$440K in Contract Costs**

■ **MilPers Trade-space remaining: 0**

Saved ~\$2.46M contract funds that can be used to pay internal bills and reduce MAJCOM tax



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Option A-2 Private Sector Care

	FY06 Summary		FY07 Summary	
DC moved to PSC	(\$64,586,054)		(\$35,353,467)	
Recap Prime		\$42,269,400		\$44,122,133
Recap NonPrime		\$25,562,966		\$30,934,289
Total Recaptured	\$67,832,366		\$75,056,422	
Overall Results	\$3,246,312		\$39,702,955	

- Model estimates impact of laydown on PSC
 - Optimized product lines staffed to meet average revenue targets
 - Reflects value of care transitioned to & recaptured from PSC
 - Multiple constraints include lag factor, bed status, non-optimization, product line specific limitations
- Limits first year's recapture; full recapture not beginning till FY07
 - Anticipated increase in TPC not included in model calculations
- "Easier to back off programmed lay down than build up"

Option A-2 gives largest PSC return & focuses on optimized



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Option A-2

Operation & Maintenance

MAJCOM	FY05	FY06	FY07	FY08	FY09	FY10	FY11
ACC							
AETC							
AFMC							
AFSOC							
AFSPC							
AMC							
PACAF							
USAFA							
USAFE							
11 TH MDG							
HQ AF/SG							

Assumes MTF Efficiencies booked against Revised Financing



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Option A-2 MILCON

Numbers being refined: Final outcome during 16 April AF/SG brief

MAJCOM	FY05	FY06	FY07	FY08	FY09	FY10	FY11
ACC							
AETC							
AFMC							
AFSOC							
AFSPC							
AMC							
PACAF							
USAFA							
USAFE							
11 TH MDG							
HQ AF/SG							

- Restores Spangdahlem Hospital MILCON in FY06/\$39M

Option A-2 Program Recap

	FY05	FY06	Percent	FY05	FY06	Percent	FY05	FY06	Percent	MAJ COM
	MILPERs	MILPERs	Change	O&M	O&M	Change	OP	OP	Change	Change
ACC										
AETC										
AFMC										
AMC										
AFSOC										
AFSPC										
PACAF										
USAF										
USAFE										
11th MDG										
AFMS Total										

- Percent of change in each program relative to changes in Option A-2

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FY06-11 POM Option B-2



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Details of MTF Laydown Proposal B-2

Services	APOM MILPERs	Propo sal MILPERs	Delta MILPERs
PCO			
Family Practice	3,160	3,232	72
Internal Medicine	392	332	-60 (-4)
Pediatrics	903	892	-11 (0)
ER	828	653	-175 (-5)

Risks

- MTFs commanders understand/communicate the LV strategy
 - Linkage between PCO and SCO not understood
- Contractors/contract services availability
- PSC recapture reduced due to SCO, PCO changes

Assumptions

- PCO - Targets enrollment growth at 11 MTFs
- Enhances ECA/CCA/BCA at 11 MTFs
 - Laydown will contribute MTF efficiencies (PBD 041)
- PCO critical component of SCO success
- ER to UCC change driven by currency case

Costs

- Contracts
 - Resource Sharing & Contractor Support Services
- PSC



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Details of MTF Laydown Proposal B-2 Continued

Services	APO M MILPERs Total	Propos al MILPERs Total	Delta MILPERs Total	Assumptions
SCO				- SCO - Funds (Phase II) at <u>6</u> MTFs includes clinics, perioperative and wards (SCO eliminated at 9 MTFs) - Ob/Gyn - Provides services at 18 MTFs using 55 AD Ob/Gyn Faces - Transitions OB at PSC at Altus, Dover, Luke, Sheppard, USAFA - Inpatient - Reduces five inpatient facilities to outpatient facilities - Incirlik, Luke, MacDill, Offutt, Sheppard - Resource Sharing & Contractor Support Services - PSC
General Surgery	318	253	-65 (-10)	
Orthopedics/Podiatry	310	249	-61 (-8)	
Obstetrics	619	526	-93 (-5)	
Inpatient Nursing	2,497	2,232	-265 (-5)	
Anesthesia	311	192	-119 (-6)	
Risks - Political fallout over reduction of inpatient facilities and OB Services - Inpatient: Incirlik, Luke, MacDill, Offutt, Sheppard - OB: Altus, Dover, Luke, Sheppard, USAFA - PSC recapture reduced due to SCO changes				Costs Project/SPM = \$14M



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Details of MTF Laydown Proposal B-2 Continued

Service S	APOM MILPERs	POM A MILPERs	Delta MILPERs
SGP	900	1,017	117
PHO	1,250	1,316	66
BEE	1,190	1,234	44
Health Promotions / HAWC	261	95	-166
Dental	3,269	3,290	21

Risks

- Line does not accept contracting HAWCs at reduced manpower level
- Line does not support change in HAWC capability

Assumptions

- FSO-Adds limited manpower at most needy installations
 - PH - Slight improvement in OH support at some installations
 - Physiology - HPTT deployment to all but AMC, LRAFB to caretaker
 - BEE - Improves env and occ support capability - Ramp-up to 08
 - HAWCs - Reduces footprint but may add capability; uses contractors in CONUS & AD in OCONUS
- | |
|--|
| ▪ DCO model will create savings |
| ▪ HAWCs - \$5.4M |
| ▪ DCO - contract dollars to support hiring support staff |



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MTF Laydown Proposal

B-2 MILPERs Tradespace

- **Tradespace:**
 - **+318 Enlisted**
 - **+116 Officers**
- **Spend strategy**
 - **Used 318 Enlisted FYDP to reduce enlisted contracts**
 - **Saved ~\$14.3M in Contract Costs**
 - **Used 116 Officers to reduce officer contracts**
 - **Saved ~\$12.8M in Contract Costs**
- **Tradespace remaining: 0**

Contract savings programmed to PSC where risk increased

Option B-2 Private Sector Care

	FY06 Summary		FY07 Summary	
DC moved to PSC	(\$65,608,808)		(\$43,159,048)	
Recap Prime		\$31,175,131		\$30,926,785
Recap NonPrime		\$18,068,838		\$24,818,187
Total Recaptured	\$49,243,969		\$55,744,972	
Overall Results	(\$16,364,839)		\$12,585,924	

Impact

- Model estimates impact of laydown on PSC
 - Optimized product lines staffed to meet average revenue targets
 - Reflects value of care transitioned to & recaptured from PSC
 - Multiple constraints include lag factor, bed status, non-optimization, product line specific limitations
 - Local constraints not included (Requires MAJCOM and MTF assessment)
- Limits first year's recapture; full recapture not beginning till FY07
 - Anticipated increase in TPC not included in model calculations

Option B-2 reduces recapture capability - AFMS at Significant



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Option B-2

Operation & Maintenance

MAJCOM	FY05	FY06	FY07	FY08	FY09	FY10	FY11
ACC							
AETC							
AFMC							
AFSOC							
AFSPC							
AMC							
PACAF							
USAFA							
USAFE							
11 TH MDG							
HQ AF/SG							

MTF Efficiencies booked against Revised Financing



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Option B-2 MILCON

Numbers being refined: Final outcome during 16 April AF/SG brief

MAJCOM	FY05	FY06	FY07	FY08	FY09	FY10	FY11
ACC							
AETC							
AFMC							
AFSOC							
AFSPC							
AMC							
PACAF							
USAFA							
USAFE							
11 TH MDG							
HQ AF/SG							

- Restores Spangdahlem Hospital MILCON in FY06/\$39M

Option B-2 Program Recap

	FY05	FY06	Percent	FY05	FY06	Percent	FY05	FY06	Percent	MAJ COM
	MILPERs	MILPERs	Change	O&M	O&M	Change	OP	OP	Change	Change
ACC										
AETC										
AFMC										
AMC										
AFSOC										
AFSPC										
PACAF										
USAF										
USAFE										
11th MDG										
AFMS Total										

- Percent of change in each program relative to changes in Option B-2

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Recommendation



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Recommendation

- **AFMS Council:**

- **Approve AFMS Group recommendation on Internal bills and corresponding offsets**
- **Forward both Options A-2 and B-2 to SG**
 - **Recommend to SG approval of Option A-2**



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Next Steps

- **Vector check with SG on 6 Apr 04**
- **Finalize AFMS TOA Distributions**
- **Final Brief to SG on 16 Apr 04**
- **Brief AF CS by early May 04**
- **Finalize workbooks**
- **Submit POM to TMA and LAF on 3 May 04**
- **Issues to be worked during remaining calendar year**
 - **Specific program changes (Travis GME, AFSOC mission)**
 - **Mil to Civ Conversions**
 - **PBD 041 (e.g. MTF Efficiencies Booking)**
 - **New PECs for PSC**
 - **HA Over-Guidance**

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